## 5020179079

FEC FORM 1

## STATEMENT OF ORGANIZATION

SECRETARY OF THE SENATE-

15 JUL 1 - AM 9: 09

FORM 1					10		Office Use Only		
1. NAME OF COMMITTEE (ir	n full)		Check if name s changed)	Example:If typin over the lines.	g, type 12F	Ė4M5			
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ADDRESS (number a	ind street)	120	Marylan	d Avenue	NE				
(Check if address is changed)		Was	hington		D(	2	0002		
				CITY	STATE	Ξ	ZIP C	ODE	
COMMITTEE'S E-MA	AIL ADDRE								
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2. DATE 07	7] [1	[ <sup>1</sup> ] / <b>2</b> 0	015						
3. FEC IDENTIFI	CATION N	UMBER	c 0	0042366;	-				
4. IS THIS STATE	MENT	NEW	(N) OR	AMEN!	DED (A)				
I certify that I have	examined t	this Stateme	ent and to the bes	t of my knowledge a	and belief it is true	, correct ar	nd complete.		
Type or Print Name	of Treasure	<sub>er</sub> De	anna Ne	sburg		N. I / MARKET TAJ E MARKET TU FARMA			
Signature of Treasur	er	Nh	M		Date	07	<b>[01]</b>	2015	
				<u>}                                    </u>					
NOTE: Submission of	false, error		,	may subject the pers ION SHOULD BE RE			e penalties of	2 U.S.C. §437g.	
Office Use Only						, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	FEC FO		